File with: lowa Ethics and Campaign Disclosure Board 510 E. 12ⁱⁿ. Ste. 1A Des Moines, 'owa 50319 Fax: 515-281-4073

COMMITTEE NAME (Must be same as on Statement of Organization)

FCR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

RECEIVED OCT 2 9 2009

MOORE FOR City Council			FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Cantral Committee (5)County Candidate (6)City Candidate (6	2)State PAC (3)State Party	(F	DR-2 lev. 12/2005)	DISCLOSURE REPORT
Subdivision Candidate (8)County PAC (9)City PAC (10)School 11) Local Ballot Issue	Board or Other Political Subdivision PAC	, ,	r Office Use Cn	ly
CANDIDATE COMMITTEES ONLY:		== 00	omm. #	
Candidate Name	Political Party (if applicable)			
SKIP MOORE	N/A			
Office Sought	District (if Senate or House)	1 1		
CITY COUNCIL AT LARGE	<i>N'/A</i>	^~u	alled	·
Late reports are subject to possible civil and criminal penalties. Pu	rsuant to lowa Code section 68B 32A/		idata for a cond	Idotala
and the chairperson, for any other type of committee, is the individ	ual responsible for filing timely and acc	urate repo	ts.	idate's committee,
Karen U. Shoopman	(515) 71.6-135	•	10/20/-	0
SIGNATURE OF PERSON FILING REPORT	(<u>515) 266-1350</u> TELEPHONE	, <u> </u>	10 29/0	CNED
		No de especiales	DATES	GMCD
I AM FILING A 10/29/09	REPORT FOR (1) ELECTION (/2\NON_=	LECTION VEN	D
(report date)	Indicate by #		TECHON LEY	
CHECK IF AMENDMENT TO REPORT DATED	<u>.</u>			
TOTAL ON DATES		ocal Comm	ittees J	- ··· Tection
Check if this is line (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed,	1.	County & Lo	cai Committees,	enter Corrow in
			,	
	· · · · · · · · · · · · · · · · · · ·			
STATEMENT OF CASH ON HAND				
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the c	al of all funds held by the ash on hand at the end	\$		-0-
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Tot	al of all funds held by the ash on hand at the end	\$		-0-
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CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the confittee. This amount MUST be the same as the confittee. This amount MUST be the same as the confittee. This amount MUST be the same as the confittee. This amount MUST be the same as the confittee. Total MONEY TAKEN IN THIS PERIOD. Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule F: Schedule H: Total Sales of Campaign Property (Attach Schedule H: Total Sales of Campaign Property (Attach Schedule H: Applies to Candidates' Commission Subtract Total Money Spent This Period Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (if final r	al of all funds held by the ash on hand at the end st report filed.) lle A) (*also see in-kind below)	\$ \$ \$	20, 14, 5,	0-
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CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the confittee. This amount MUST be the same as the confittee that reporting period or must be zero if this is find ADD TOTAL MONEY TAKEN IN THIS PERIOD. Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule F: Schedule H: Total Sales of Campaign Property (Attach Schedule H: Total Sales of Campaign Property (Attach Schedule H: Applies to Candidates' Commission Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (if final reporting BILLS (From Schedule D - Attach Schedule D)	al of all funds held by the ash on hand at the end st report filed.) the A) (*also see in-kind below) the Schedule H) stittees Only) SUB-TOTAL **also see debts and loans below) F) ort balance must be zero)	\$ \$ \$ \$ \$	20, 14, 5,	226.05 451.18 -0- 774.87 241.64 500.00
CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the confit the last reporting period or must be zero if this is find ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule Schedule H: Total Sales of Campaign Property (Attach Schedule H: Total Sales of Campaign Property (Attach Schedule H: applies to Candidates' Commischedule B: Expenditures total (Attach Schedule B) (Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (if final reporting BILLS (From Schedule D - Attach Schedule D)	al of all funds held by the ash on hand at the end st report filed.) the A) (*also see in-kind below) the Schedule H) stittees Only) SUB-TOTAL **also see debts and loans below) F) ort balance must be zero)	\$ \$ \$ \$ \$	20, 14, 5,	226.05 451.18 -0- 774.87 241.64 500.00
CASH ON HAND at the beginning of the reporting period. (Tot committee. This amount MUST be the same as the confittee. This amount MUST be the same as the confittee. This amount MUST be the same as the confittee. This amount MUST be the same as the confittee. This amount MUST be the same as the confittee. The same period or must be zero if this is first and the last reporting period of this period. Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule F: Schedule H: Total Sales of Campaign Property (Attach Schedule H: Total Sales of Campaign Property (Attach Schedule B: Expenditures total (Attach Schedule B) (Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (if final reportune) BILLS (From Schedule D - Attach Schedule T) IN KIND CONTRIBUTIONS (From Schedule F - Attach Schedule CONSULTANT BREAKDOWN (Schedule G Attached?)	al of all funds held by the ash on hand at the end st report filed.) lle A) (*also see in-kind below)	\$ \$ \$ \$ \$	20, 14, 5,	226.05 451.18 -0- 774.87 241.64 500.00

For Instructions, See Back of Form		
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) MOORE FOR CITY COUNCIL	CHEC AMEN	K THIS BOX IF
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), I NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN: A LIST OF ID NUMBERS IS AVAILABLE FROM THE DISCLOSURE BOARD.	LIST THE PAC IDEN E IOWA ETHICS AN	ATIFICATION D CAMPAIGN
NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMP RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.	PAIGN MAY HAV	E FILING

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

milial relationship, enter "not applicable" in the relationship column.

DATE RECEIVED	PAC ID NUMBER (if applicable)	THE PROPERTY OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
(MM/DD/YR)	AND PAC CHECK NUMBER		TC CANDIDATE* (if applicable)	RECEIVED	FUND- RAISER
07/09/09	ID#	CONNIE MARTURELLO		50.05	INCOME
	CK#	3620 SW 9th ST. DES MOINES		\$ 50.00	
07/10/09	ID#	MARION MORMANN		100 05	
	Ск#	3320 Kinsey Ave. Des Moines, IA 50317		100,00	
27/10/09	ID#	WILLIAM GRAY			
	CK#	4617 FRANKLIN AVE. DES MOINES, IA 50310		25.00	
77/10/09	ID#	MARJORIE PORTER			
	CK#	4800 MADISON AVE. DES MOINES, IA 50310		100.00	
27/10/09	ID#	BRIAN MILLARD		/	
	CK#	3920 LYNNAR DR. DES MOINES, IA 50310		100.00	<u>.</u>
7/10/09	ID#	LORI TALLMAN			
10,00	CK#	3920 LYNNER DR		50.00	
17/10/09	ID#	DES MOINES, TA 50310			
<i>> 1 10 0</i> 1	CK#	UNITEMIZED CONTRIBUTION		20.00	
17/12/09	ID#	UNITEMIZED CONTRIBUTION			
, 1,101,0	CK#	UNITEMIZED WARRING		70.00	
17/14/09	ID#	GEORGE KARMOOS	·	<i>6</i> 2	
	CK#	GEORGE KARAIDOS 8114 SUNRISE BLVD. CLIVE, IA 50325		50.00	
7/14/09	ID#	CYNDY COPPOLA			
	CK#	1004-56th ST. Des moines, IA 50311		75.00	
			SUB-TOTAL		

TOTAL (if last page of this schedule) Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the mmittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by arriage). If surname of contributor is the same as candidate, but there is no

For	instructions,	See	Back	ΩĒ	Form
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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

rion of oil g comonic	MOORE	FOR	City	Council
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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
CHEC AME:	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF COURS			
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNIT RECEIVED	V IF FOR FUND- RAISER
07/14/09	CK#	UNITEMIZED CONTLIBUTIONS		\$ 40.00	INCOME
07/14/09	1	BRENDA OLSON 3012 E. 31STST.		100.00	
	CK#	DES MOINES, IA 50317		-	
37/16/09	ID# CK#	UNITEMIZED CONTRIBUTIONS		610.00	/
27/16/07	ID#	KATHERINE CARACCIOLO			
	CK#	1822 SW PORTER AVE DES MOINES, IA 50315		25.00	<b>V</b>
27/16/09	ID#	MARSHA STEELE 1427 THOMPSON AVE.		25,00	/
77/16/09	ID#	DES MOINES, IA SUBIL			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	CK#	ROGER COENEN 2690 NE 96th AVE.		30.00	1
27/16/09	ID#	CAROL FETTERS		30.00	
27/11/10	CK#	3111 DUBUQUE AVE. DES MOINES, IA 50317			
37/16/09	CK#	ROGER SCHOONOVER 1118 38 th St. <u>DES MOINES,</u> IA 50311		30.00	/
07/16/09	ID#	ADELE BATES		50.00	
,	CK#	3706 E. 28 ST. DES MOINES, IA 50317			<b>Y</b>
07/16/09	CK#	DONALO BECK 716 62 ST. DES MOINES, IA 50312		50.00	/
			SUB-TOTAL	99000	

TOTAL (if last page of this schedule)

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lisclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the minittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by image). If sumame of contributor is the same as candidate, but there is no nilial relationship, enter "not applicable" in the relationship column.

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

MOORE FOR CITY COUNCIL

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
CHEC AME	OK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR			
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	THE REPORT OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
07/16/09	) ID#	GORDON GREGER			INCOME
, , .	CK#	JES MOINES, IA 50310		\$ 50.00	V
07/16/09	ID#	R.G. NOVAK	<del> </del>		<u> </u>
	CK#	200 S. 30 ST. WEST DES MOINES, IA 50265		50,00	
07/16/09	ID#	SCOTT MOORE			
	CK#	812 NE REDWOOD LN. ANKENY, IA 50021	BROTHER	100.00	/
07/16/09	ID#	CAROLYN STEPHENS			
	CK#	1900 WOODLAND AVE. DES MOINES, IA 50312		100.00	/
37/16/09	ID#	STEPHANIE TRUJILLO		100 00	
	CK#	3301 SE 199 ST. DES MOINES, IA 50320		100,00	V
77/16/09	ID#	JOHN MORRISSEY			
	CK#	2913 OXFORD ST. DES MOINES, IA 50313		250.00	
17/18/09	ID#	UNITEMIZED CONTRIBUTIONS			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	CK#	WALLEWISE O CONTADUTIONS		20.00	
77/18/09	ID#	WILLIAM MCCARTHY			
771.070	CK#	5201 SE 32 PST. DES MOINES, IA 50320		50.00	
7/20/09	ID#	MARILYN STAPLES			
	CK#	3509 CAULDER AVE.		50,00	
77/22/09	ID#	DES MOINES, IA 50321 MARK DUGAN			
, , , , , , , , , , , , , , , , , , , ,	City	4134 51ST ST.		50.00	
· · · · · · · · · · · · · · · · · · ·		DES MOINES, IA 50310	OLIO TOTAL		
			SUB-TOTAL	820.00	

TOTAL (if last page of this schedule)

\$000.

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the mmittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by image). If sumame of contributor is the same as candidate, but there is no milial relationship, enter "not applicable" in the relationship column.

Page 3 of 12 (for Schedule A)

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

	MOORE	FOR	CITY	Council
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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
CHEC	CK THIS BOX IF
AME	NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	I DELATIONOLIS		
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER		RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER
07/23/09	CK#	UNITEMIZED CONTRIBUTIONS		\$ 60.00	INCOME
07/23/09	CK#	EVA HORSTMAN 1720 YORK BT. DES MOINES, IA SO316		25,00	V
07/23/09	CK#	ROBERT MAHAFFEY 2220 E. 32 PST, DES MOINES, IA 50317		25.00	/
07/23/09	ID# CK#	JAMES PETERSONI P.O. BOX 754 DES MOINES, IA 50303		35.00	~
07/23/09	ID# CK#	KIM STEWART 1415 THOMPSON AVE. DES MOINES, IA 50316		50.00	
07/23/09	ID# CK#	REND TONSI 1540 CAPITOLAVE. DES MOINES, IA 50316		50.00	V
77/24/09	ID# CK#	CIVIL SERVANTS POLITICAL EDUC, LEAGUE 2121 DELEWARE AVE. DES MOINES, IA 50317		500.00	
17/25/09	ID#	ROGER GIPPLE P.O. BOX GREENFIELD, IA 50849		50.00	
1   3   0	ID# CK#	KEN KRUSE 6790 SE 36 ST. DES MOINES, IA 50320		70.00	
1125/04	ID# CK#	UNITEMIZED CONTRIBUTIONS		20.00	
	<u></u>		SUB TOTAL		

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 885,00

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the mmittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by image). If surname of contributor is the same as candidate, but there is no nilial relationship, enter "not applicable" in the relationship column.

Page 4 of 12 (for Schedule A)

#### CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

MOORE FOR CITY COUNCIL

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE ICWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER		TO CANDIDATE* (if applicable)	RECEIVED	FUND- RAISER INCOME
08/04/09	CK#	JAMES WITTKOP 1411 415 ST. DES MOINES, IA 50311		\$25.00	
08/04/09	ID#	UNITEMIZED CONTENBUTIONS		40.00	
08/06/09	CK#	PENNY ROUNDS 2933 GUTHERIE AVE. DES MOINES, IA 50317		25,00	
28/06/09	CK#	BETTIE DANLEY 2706 E. TIFFIN DES MOINES, IA 50317		25.00	
78/11/09	ID# CK#	RALPH CONNER 1612 YORK ST. DES MOINES, IA 50316		300.00	
D8/13/09	ID# CK#	UNITEMIZED CONTRIBUTIONS		75.00	~
>8/13/09 	ID# CK#	ISABELLA MARTURELLO 3620 SW 9th ST. DES MOINES, IA 50315		50.00	<b>/</b>
28/13/ <i>09</i>	ID# CK#	ROBERT MENDENHALL 2459 E. HIGHVIEW DR. DES MOINES, IA 50320		50.00	/
78/13/09	ID#	JOE HENRY 2463 E. HIGHVIEW DR DES MOINES, IA 50320		150.00	_
08/15/09	ID# CK#	JOHN SARCONE 3004 SW 39 ST. DES MOINES, IA 50321		25.00	
			SUB-TOTAL	715.00	

TOTAL (if last page of this schedule)

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the mmittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by image) If sumame of contributor is the same as candidate, but there is no nilial relationship, enter "not applicable" in the relationship column.

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Moore	FOR	City	Courcic
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SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF IDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTE			
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
08/17/09	ID#	UNITEMIZED CONTRIBUTIONS			INCOME
•	CK#			\$ 20.00	
08/18/09	ID#	MARC WALLACE		100,00	
	CK#	2127 E. 29 & ST DES MOINES, IA SO317		100.00	
08/19/09	ID#	EDGAR HANSELL		50.00	
	CK#	DES MOINES, TA 50312		30,00	
28/20/09	ID#	MIKE KINTER		49-1-1-1	
•	CK#	118 SE 45 ST. DES MOINES, IA 50309		25,00	
08/20/09	ID#	JIM ERICKSON			
	CK#	3818 THORNTON AVE.		50.00	
20/2/10	ID#	DES MOINES, TA 50321			
28/21/09	CK#	UNITEMIZED CONTRIBUTIONS		15,00	
28/24/09	ID#	CHARLES WHITLATCH			
20147109	CK#	807 SW PHILIP ST.		50.00	
28/26/09	ID#	DES MOINES, TA 50315			
Jojarejui	CK#	KARL MCLAIN 3811 HILLCREST DR.		50.00	
	- CA#	DES MOINES, IA 50310			
08/26/09	ID#	MARYSPURGEON		25.00	
	CK#	1056 1124 ST. KNOXVILLE, IA 50138		20,00	
28/26/09	ID#	IBEW LOCAL 347			
70/20-10/	CK#	850 - 18th ST.		500.00	
		DES MOINES, IA SO314			
			SLIP TOTAL		

SUB-TOTAL

TOTAL (if last page of this schedule)

s 885,00

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the minitee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by arriage). If surname of contributor is the same as candidate, but there is no nilial relationship, enter "not applicable" in the relationship column.

Page 6 of 12 (for Schedule A)

#### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

CC

MIMITTEE NAME (Must be same as on Statement of Organization)	
MOORE FOR CITY COUNCIL	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
CHECK THIS BOX	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP		
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER		TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	VIF FOR FUND- RAISER INCOME
08/26/0	CK#	LABORERS LOCAL 177 2121 DELEWARE AVE. DES MOINES, IA 50317		\$2,500.00	INCOME
08/29/09	ID# CK#	SHANNON RAMSEY 8022 SUDEROCK RD ANAMOSA, IA 52205		75,00	
09/01/09	ID# CK#	EVANS PHILLIPS 5133 SE 32nd ST. DES MOINES, IA 50320		25,00	
09/01/09	ID#   C:<#	BETTY PATRICK 625 E. JACKSON DES MOINES, TA 50315		50.00	
29/01/09	ID#	UNITEMIZED CONTRIBUTIONS		69.00	
09/03/09	ID# CK#	SUZETTE JENSEN 3127 THOMPSON AVE. DES MOINES, IA 50317		100.00	
19/03/09	ID# CK#	CIVIL SERVANTS POLITICAL ACTION LEAGUE 2121 DELEWARE AVE. DES MOINES, IA 50317		2,000.00	
19/03/09	ID# CK#	GREAT PLANS LABORERS DISTRICT COUNCIL IOWA		1,000,00	
19/03/09	UN# 1	KENNETH WINBER 6009 N. WATERBURY RD. DES MOINES, IA 50312		25.00	
19103109	ID# CK#	UNITEMIZED CONTRIBUTIONS		10.00	
			CUD TOTAL		

SUB-TOTAL

TOTAL (if last page of this schedule)

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the mmittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by irriage). If surname of contributor is the same as candidate, but there is no nilial relationship, enter "not applicable" in the relationship column.

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
- Wild the state as on Statement of Organization)	
MOORE FOR CITY COUNCIL	
NUVER FOR CATA COMMON	
- Total Oily Wallace	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
CHEC AMEN	ON THIS BOX IF

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA STHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TC CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
09/04/0	CK#	CHRISTINE PAGE 3547 SW 9th ST. DES MOINES, TA 50321		\$ 50.00	INCOME
09/04/04	7 ID# CK#	GREGORY PAGE 3547 SW 9th ST. DES MOINES, TA 50321		50.00	
09/10/09	CK#	MARJORIE RAMSEY P.O. BOX DES MOINES, IA 50301		40.00	
09/10/09	CK#	UNITEMIZED CONTRIBUTIONS		20.00	
59/11/09	ID#	LINDA WALLACE 1235 CRESTON AVE. DES MOINES, IA 50315		50.00	
79/12/09	ID# CK#	JOHN MORRISSEY 2913 QXFORD ST DES MOINES, IA 50313		250.00	
59/16/09 	ID#	LINDA RIVAS 2912 SW 9th ST. DES MOINES, IA 50317		50.00	
99/16/09 	ID#	UNITEMIZED CONTRIBUTIONS		22.00	
39/21/09	ID# CK#	UNITEMIZED CONTRIBUTIONS		65.00	
9/22/09	ID#	UNITEMIZED CONTRIBUTIONS		200.00	
·	<u> </u>		SUB-TOTAL		

SUB-TOTAL

TOTAL (if last page of this schedule)

8 13

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the minittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by image). If surname of contributor is the same as candidate, but there is no nilial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

MOORE FOR CITY COUNCIL

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IGWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
09/22/0	CK#	DIANE SCHAEFER 703 ARTHUR AVE. DES MOINES, IA 50316		\$ 25,00	
09/22/09	CK#	JAMES DANK 1515 E. 38th ST. DES MOINES, IA 50317		50.00	V
09/22/09	CK#	MARSHA STEELE 1427 THOMPSON AVE. DES MOINES, IA 50317		50.00	/
79/23/09	ID#	UNITEMIZED CONTRIBUTIONS		145.00	<b>/</b>
39/23/09	ID#	JOE YOUNGWIRTH 3824 LAYST. DES MOINES, IA 50317		50.00	V
19/23/09	ID#	HARLEY RYNNING 1110 FREMONTST. DES MOINES, IA 50316		50.00	/
)9/23/09 	ID# CK#	MICHAEL LIPOVAC 5135 MERCEO ST. DES MOINES, IA 50310		100.00	V
59/23/09 	ID# CK#	DENNIS SHARP 4985 COPPER CREEK DR. PLEASANT HILL, IA 50327		100.00	
19/24/09	ID# CK#	JANE THOMAS 2341 LOGAN ST. DES MOINES, IA 50317		25.00	
19/25/09	CK#	CENTRAL IOWA BUILDING AND CONSTRUCTION TRADES COUNCIL RO. BOX 7310 DES MOINES, IA 50309	ن .	2,500.00	
			SUB-TOTAL	3095.00	

TOTAL (if last page of this schedule)

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g of 12 (for Schedule A)

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the mmittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by arriage). If sumame of contributor is the same as candidate, but there is no milial relationship, enter "not applicable" in the relationship column.

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization	
Wild be same as on Statement or Organization	)
Maria	
INCORE FOR CATALOUNCE	
MOORE FOR CITY COUNCIL	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	OK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CK#	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
CK#   3 24 SW 29th ST,   DES MONNES, TA 5032	09/26/09		UNITEMIZED CONTRIBUTIONS		\$ 60.00	INCOME
CK#		1	3124 SW 29th ST.		200.00	( ) ( )
10 02 09	10/02/09	CK#			200.00	✓ <u> </u>
Des   Des	10/02/09	CK#	1899 NW 72 MST.		50.00	V
CK# 39 19 URBANDALE AVE.   25.00     O 02 09   ID#   ELIZABETH BRIEN   39 19 URBANDALE AVE.   DES MOINES, TA 50310     O 02 09   ID#   UNITERNIZED CONTRIBUTIONS   90.00     CK#   CK#   CRAIG CAMPBELL   100.00     CK#   CK#   DES MOINES, TA 50317     O 06 09   ID#   MARTY MAUK   2701 ARTHUR AVE.   100.00   V	0102109	CK#	BRENDA OLSON 3012 E. 31ST ST.		100.00	
CK#   3919 URBANDALE AVE.   25.06	0/02/09				25.00	
CK# CK# CRAIG CAMPBELL  O 05 09 ID# CRAIG CAMPBELL  I601 E. 29th ST.  DES MOINES, IA 50317  O 06 09 ID# MARTY MAUK  CK# 2701 ARTHUR AVE.	002109		3919 URBANDALE AVE.		25,06	
CRAIG CATRIPLE 100.00  CK# 1601 E. 29th ST.  DES MOINES, IA 50317  MARTY MAUK  CK# 2701 ARTHUR AVE.  100.00	0/02/09		UNITEMIZED CONTRIBUTIONS		90.00	
CK# 2701 ARTHUR AVE. 100.00 V		CK#	·		100.00	
	0106109	CK#			100.00	V .

SUB-TOTAL

TOTAL (if last page of this schedule)

\$950,00

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the minittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by arriage). If sumame of contributor is the same as candidate, but there is no nilial relationship, enter "not applicable" in the relationship column.

Page 10 of 12 (for Schedule A)

For Instructions, See Back of Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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MOORE FOR CITY COUNCIL

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
10/06/09	ID#	F. DOW BATES 3706 E. 28# ST.		\$.50.00	INCOME
	CK#	DES MOINES, IA 50317			
10/06/09	CK#	PETER ROUNDS 2933 GUTHRIE AVE. DES MOINES, IA 50317		50,00	V
10/06/09	ID#	JANIS BOWDEN 1250 E. 37 ST. DES MOINES, TA 50317		30.00	i-
10/06/09	ID# CK#	UNITEMIZEP CONTRIBUTIONS		20.00	V
10/07/09	ID# CK#	UNITEMIZED CONTRIBUTIONS		20.00	
0/07/09	ID# CK#	WILLIAM WHEELER 3613 64 AVE. DES MOINES, IA 50313		50,00	
7/10/04	ID# CK#	JAMES GROCHALA 250'7 KENWAY DES MOINES, IA 50310		96.80	
0110109	ID# CK#	ANDREA RIVERA-HARRISON 3660 PARK AVE. DES MOINES, IA 50321		50.00	
0110109	ID# CK#	UNITEMIZED CONTRIBUTIONS		30.00	
0115/01	31411	OPERATING ENGINEERS LOCAL 234 4880 HUBBELL AVE. DES MOINES, IA 50317		1,000,00	
			SUB-TOTAL	1396.80	

TOTAL (if last page of this schedule)

Page // of /2 (for Schedule A)

AMENDING FORM

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the mmittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by arriage). If surname of contributor is the same as candidate, but there is no milial relationship, enter "not applicable" in the relationship column.

Englastructions O D			
For Instructions, See Back of Form		SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		(Rev. 07/03)	MONETARY RECEIPTS
	***		

COMMITTEE	AME (Must be same as on Statement of Organization)	
MOORE	FOR CITY COUNCIL	

<b>A</b>	MONETARY
(Rev. 07/03)	RECEIPTS
	OK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	V IF FOR
(MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER		TC CANDIDATE* (if applicable)	RECEIVED	FUND- RAISER INCOME
10/15/09	CK#	KEVIN MORAN 5501 GARRISON AVE. JOHNSTON, IA 50131		\$ 48.25	
10/16/09	ID# CK#	GREAT PLAINS LABORERS COUNCIL TOU 5806 MEREDITH DR. DES MOINES, IA 50322	А	1,000.00	
10/16/09	ID#	CENTRAL IOWA BUILDING AND CONSTRUCTIONS TRADES COUNCIL P.O.BOX 7310 DES MOINES, TA 50309		1,000.00	
0/16/09	ID# CK#	SOUTH CENTRAL IOWA FEDERATION OF LABOR 2000 WALKER ST. DES MOINES, IA 50317		500.00	
0   20   09	ID#	LINDA MYERS 1204 WALKER ST DES MOINES, IA 50316		25.00	
0/20/09	ID# CK#	ROBIN ARNOLD 200 39th ST. WEST DES MOINES, IA 50265		50.00	
0/20/09	ID# CK#	L. NADINE BELKIN 416 SE GRAY ST. DES MOINES, TA 50315		25.00	
0 22 09	ID#	UNITED STEEL WORKERS OF AMERICA 125 NW BROADWAY DES MOINES, IA 50317		500.00	
	ID# CK#	NA			
	ID# CK#	NA	`		

SUB-TOTAL

TOTAL (if last page of this schedule)

\$20,226.9

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the immittee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by amage). If sumame of contributor is the same as candidate, but there is no milial relationship, enter "not applicable" in the relationship column.

Page 12 of 12 (for Schedule A)

#### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES		
CHECK THIS BOX IF AMENDING FORM			

COMMITTEE NAM	E (Must I	be same	as on State	ement of	Organization)
MOORE	FOR	City	Cour	CIL	

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
07/10/09	CK# N/A	COMMUNITY STATE BANZ 3540 E. 33RD ST DES MOINES, IA 50317	BANK CHECK FEE	\$23.15
07/22/09	ID# CK# <i>[CC]</i>	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	LETTERHEAD, # 10 ENVELOPES POSTCARDS, REMITTAINSE ENVELOPES - PRINTING	401.74
07/22/09	ID# CK# 1002	HYVEE 2540 E. EUCLID AVE. DES MOINES, IA 50317	FOOD EXPENSE FOR KICKOFF EVENT	270.00
07/23/09	ID# CK#  003	MITCH HENRY 1900 MLKING PKWY DES MOINES, IA 50314	CAMPAIGN WORKER	400.00
07/23/09	ID# CK# <i> 0</i> 04	KAREN SHOOPMAN 3804 INDIANA POUSAVE. DES MOINES, IH 50317	FOOD FOR KICKOFF EVENT	98.60
07/27/09	CK# 1005	SKIP MOORE 3822 E. 28th ST. DES MOINES, IA 50317	CELL PHONE CALL FOR CANDIDA ROBO CALLS, POSTAGE FOR KICKOFF EVENT, COMMITTEE MEETING LUNCHES, OFFICE SUPPLY REIMBURSEMENT, FORTHEASURE LAPEL STICKERS	921.99
07/29/09	CK# 1006	DES MOINES, IA SO316	PENTING	187.62
08/11/09	ID# CK#   007	BEAVER DALE FALL FESTIVAL 4221 ALLISON AVE. DES MOINES, IA 50310	APPLICATION FEE FOR PARADE IN BEAVERDALE	50.00

SUB-TOTAL \$23

TOTAL (if last page of this schedule)

THIS BOX APPRIES TO CANDIDATES COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

	1	Q*
Page		of

#### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE  B (Rev. 07/03)	MONETARY EXPENDITURES
1	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

MODRE FOR CITY COUNCIL

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08/11/09	CK# 1008	MITCH HENRY 1900 MLKING PRWY. DES MOINES, IA 50314	CAMPAIGN WORKER	\$ 100.00
ପଞ୍ଚୀମ/୭୨	CK# 1009	SKIP MOORE 3822 E. 28th ST. DES MOINES, IA SOBIT	CFFICE SUPPLIES FOR TREASURED POSTAGE FOR FUNDRAISER, PRINTIN FOR FUNDRAISER, FOOD FOR FUNDRAISER - REIMBURSEMENT	i 172.18
08/15/09	CK# [Ø]0	MITCH HENRY 1900 ML KING PKWY. DES MOINES, IA 50314	CAMPAIGN WORKER	100.00
08/16/09	CK#   O	KAREN SHOOPMAN 3804 INDIANAPOLIS AVE. DES MOINES, IA 50317	POSTAGE FOR THANK YOU NOTES FOR KICKOFF EVENT.	46.56
08/17/09	ID# CK#1012	CARTER PRINTING 1739 E. GRAND AVE, DES MOINES, IA 50316	REMITTANCE ENVELOPES PRINTING	127,20
08/17/09	ID# CK#  013	POLK COUNTY ELECTION OFFICE 120-2NP AVE., SUITE A DES MOINES, IA 50309	VOTER LISTS	50.00
08/27/09	ID# СК# [ <i>O</i> 1 ¹ /	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	LETTERHEAD PRINTING	82.68
08/27/09	ID# CK# 1015		CANDIDATE CELL PHONE CALLS, COMMITTEE MEETING LUNCH, OFFICE SUPPLIES FOR TREASURER-REIMBURSEMENT SUB-TOTAL	116.78 \$ <b>795.40</b>

TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A4402(3)(i).)

Page 2 of 8

#### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b>	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF ENDING FORM

MOORE FOR CITY COUNCIL

///	UCKE TUK	City Council		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08 27 09	CK# 1016	DES MOINES PUBLICUBRAR 2559 HUBBELL AUE DES MOINES, TA 50317	MEETING ROOM RENTAL	\$ 40.00
८८/२१/०१	ID# CK#1017	MITCH HENRY 1900 ML KING PKWY. DES MOINES, IA 50314	CAMPAIAN WORKER	200.00
08 30 09	CK# 1018	MITCH HENRY 1900 ML KING PKWY. DES MOINES, IA 50314	CAMPAIAN WORKER	200.00
09/03/09	CK#1019	KAREN SHOOPMAN 3804 INDIANAPOLIS AUE. DESMOINES, TA 50317	PRINTINA FOR: CAMPAIAN UTERATURE	10.00
09/03/09	ID# CK# <i>1020</i>	SKIP MOORE 3822 E. 28 th ST. DES MOINES, IA 50317	FOOD FOR FUNDRAISER, SUPPLIES FOR OFFICE TREASCIREN-REIMBURSEMENT	142.20
09/03/09	ID# CK# 1021	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	PRINTING BUSINESS CARPS	61.48
09104109	ID# CK#  022	IMARE POINT P.O. BOX (1224 LAPORTE RO. WATERLOO, IA SO704	PRINTING TEESHIRTS FOR CAMPAIGN	391.60
09/04/09	ID# CK#  023	PLEASANT HILL POST OFFICE DES MOINES, IA 50317	POSTAGE-EXPRESS MAIL CHECK FOR TEESHIRTS	13,05
			SUB TOTAL	\$105773

TOTAL (if last page of this schedule): \$

\$1057.73

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Page 3 of 8

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE	NAME	(Must	be	same	as on S	Statement	of Organization)
				_	_		5

MOORE	FOR	City	Council
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DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09/04/09	CK#1024	SKIP MOORE, 3822 E. 28th ST. DES MOINES, IA 50317	PRINTING EXPENSE FOR PHOTO - REIMBURSEMENT	\$115.54
09/11/09	CK# 1025	MITCH HENRY 1900 ML KING BLVD DES MOINES, IA 50314	CAMPAIGN WORKER	300,00
09/15/09	CK#1026	LEACHMAN LUMBER CO. 1921 HUBBELL AVE. DES MOINES, TA 50316	ORIENTED STRAND BOARD FOR YARD SLANS	430.89
09/15/09	ID# CK# <i>1027</i>	HYVEE 2540 E. EUCLID DES MOINES, IA 50317	FOOD FOR FUNDRAISER	52.90
09/18/09	ID# CK# 1028	JESSICCA BENDA	WEBMASTER	230.00
09 22 09	CK# 1029	WALGREENS 2545 E. EUCLID DES MOINES, IA 50317	OFFICE SUPPLIES FOR TREASURER	9,52
09/22/09	ID# CK# 1030	HYVEE 4815 MAPLE DR. PLEASANT HIII, IA 50327	FOOD FOR FUNDRAISER	14.50
09 23 09	ID# CK# [03)	DES MOINES STAMP 815 - 6 th AVE. DES MOINES, TA 50306	OFFICE SUPPLIES-RUBBER STAMP	12.72

SUB-TOTAL \$

TOTAL (if last page of this schedule)

# THIS BOX APPLIES TO CANDIDATES COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowe Code 68A:402(3)(i).)

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Page	7	of	D	

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHE	DULE	
	5	
[	3	MONETARY
(Rev.	07/03)	EXPENDITURES
<b>—</b> —		
	_	CK THIS BOX IF

COMMITTEE NAME	(Must be	same	as on	Statement	of Organization
		_			

MOORE FOR CITY COUNCIL

	CANDIDATE	NAME AND ADDRESS TO MILON	21/22225	<del></del>
DATE EXPENDED (MM/DD/YR)	ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09/23/09	ID# CK# <i>[03.2</i>	HYVEE 2540 E. EUCLID	FOOD FOR FUNDRAISER	\$13.92
	UN# 1032	DES MOINES, IA 50317		\$15.1~
09/25/09		MITCH HENRY 1900 ML KING PKWY.	CAMPAIGNWORKER	300.00
	CK# 1033	DES MOINES, IA 50314		
09/28/09	ID# 、	PLEASANT HILL POST OFFICE	POSTAGE FOR FUNDRAISER	10.37
o specie	ck#1034	US POSTMASTER PLEASANT HILL, IA 50327		13.2,
09/28/09	ID#	STAPLES 3500 8th ST. SW	PENS FOR FUNDRHISER	7.94
	CK# 1035	ALTOONA, IA 50009		•
10 02 09	ID#	CARTER PRINTING 1739 E. GRAND AVE.	PRINTING YARD SIGNS	1,232,25
•	CK# 1036	DES MOINES, IA 50316	,	()- ()-
10/02/09	ID#	CARTER PRINTING	PRINTING FLYERS	285,14
	CK#1037	1739 E. GRANDAVE. DES MOINES, TA 50316	·	
10/06/09	ID#	U.S. POSTMASTER	POSTAGE FOR THANK	4.82
	ck# 1038	PLEASANT HILL POST OFFICE PLEASANT HILL, IA 50327	YOU NOTES	4.82
10/09/09	ID#	MITCH HENRY 1900 ML KING PKWY.	CAMPAIAN WORKER	300.00
1-10 1101	ск# <i>1039</i>	1900 ML KING PKWY. DES MOINES, TA 50314		
	· · · · · · · · · · · · · · · · · · ·		SUB-TOTAL	\$2154.44

TOTAL (if last page of this schedule)

#### THIS BOX APPEIES TO CANDIDATES COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

(for Schedule B)

Reset	Form

#### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

MOORE FOR CITY COUNCIL

	CANDIDATE	NAME AND ADDRESS TO WHOM	PURPOSE	AMOUNT
DATE	ID NUMBER	EXPENDITURE	(DESCRIBE TRANSACTION)	EXPENDED
EXPENDED (MM/DD/YR)	(if applicable) AND PAC	(Disbursement) WAS MADE		
(	CHECK			
	NUMBER	04.24445	CELL PHONE CALLS FOR CAMPAIGN	7
10/12/09	ID#	SKIP MOORE	DESCRETE END EUNDRAISERS	102 22
, ,	CK# 1040	3822 E.28th ST.	VIGN MITTEE MEETING AUNCED EST	\$ 692.22
	7090	DES MOINES, IA 50317	OFFICE SUPPLIES FOR YARD SIGNS AND PARADE-REIMBURSE	MENTS
10/12/09	ID#	MARLON MORMANN	FOOD FOR PHONE BANKING	
1 1.5 /5 /	044 (044)	3320 KINSEY AVE.		20.14
	CK#1041	DES MOINES, IA 50317		
	ID#		COPYING FOR FUNDRHISER	., ., .,
10/14/09		COPY SYSTEMS 920 E. 21 ST ST.	Coryllog 102 1011111111111	4.35
	CK#1042	DES MOINES, TA SO317		
		l		
10/19/09	ID#	CARTER PRINTING	PRINTING LAPEL STICKERS	187.62
	CK#1043	1739 E. GRAND AVE.		137.02
	014110-17	DES MOINES, IA 50316	·	
10/19/09	ID#	CARTER PRINTING	PRINTING REMITTANCE	
10/19/109		1739 E. GRAND AVE.	ENVELOPES	127.20
	CK# 1044	DESMOINES, IA 50316	ENVELOPES	100,7120
101.01	ID#	CARTER PRINTING	00	
10/19/09		1739 E. GRAND AVE.	PRINTING # 10 ENVELOPES	67.84
	CK# 1045	DES MOINES, IA 50316		<i>()</i> / ( ) /
	104			
10/19/09	ID#	CARTER PRINTING	PRINTING YARD SIGNS	1,232,25
	CK# 1046	1739 E. GRAND AUE.		
		DES MOINES, IA 50316		
10/19/09	ID#	SKIPMOORE	CELL PHONE CALL	1100 10
דטוריוטו	CK# /047	1739 E. GRAND AVE.	REIM BURSEMENT	493.60
	UN# /U7 /	DES MOINES, IA 50316		
<u> </u>		1	SUB-TOTAL	\$2825.22

TOTAL (if last page of this schedule)

\$2825.22

#### THIS BOX APPRIES TO CANDIDATES! COMMITTEES! ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G.by the amount, purpose and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and low/schedule G. Instruction and G. Ins

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#### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME	(Must be	same as on Statement of Organization)
MOORE	FOR	CITUL COUNCIL

1110	OPC TOR	City Council		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/19/09	1	SKIP MOORE 3822 E. 28th ST.	LUNCH EXPENSE FOR TREASURE OFFICE SUPPLIES FOR CAMPAIAN,	R,
	CK#1048	DES MOINES, IA 50317	1 - 1	\$277,09
10/19/09	ID#	KAREN SHOOPMAN	COPYING CHECK FOR	
	CK#1049	3804 INDIANAPOLIS AVEI DES MOINES, IA 50317	BANK DEPOSIT	14.20
10/19/09	ID#	KARENSHOOPMAN	CAMPAIAN WORKER	250,00
	ck# 1050	3804 INDIANAPOLIS AUE DES MOINES, IA 50317		
10/19/09	ID#	COPY SYSTEMS 920 E. 21 ST.	COPYING CHECKS FOR	1.70
	CK# 1051	DES MOINES, IA 50317	BANK DEPOSIT	
10/19/09	ID#	VICTORY STORE, COM 5200 SW 30th ST.	COMMUNICATION EXPENSE	900.00
	CK# 1052	DAVENPORT, IA 52802	FOR ROBO CALLS	
10/20/09	ID#	U.S. POSTMASTER	POSTAGE FOR FUNDRAISER	74 (70
	ck# 1053	PLEAS ANT HILL POST OFFICE PLEASANT HILL, IA 50327	AND THANK YOU NOTES	74,70
10/21/09	ID#	COPY SYSTEMS 920 E. 21ST ST.	COPING WARD MAPS	7.95
Ì	CK# 1054	DES MOINES, IA 50317		
10/22/09	ID#	US POSTMASTER	POSTAGE FOR MASS	2073.58
	ск# 1055	1165 2 NO AVE. DES MOINES, IA 50306	MALER	

TOTAL (if last page of this schedule) \$

SUB-TOTAL

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

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Page		_ of _	0	

#### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
<b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
Псне	CK THIS BOX IF

AMENDING FORM

COMMITTEE NAME (M	lust be same	as on Statement of Organization)	
MOORE	FOR	City Council	

	100/00	The College College		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/23/09	ID# CK# 1056	MITCH HENRY 1900 MLKING PKWY, DES MOINES, IA 50314	CAMPAIGN WORKER	\$ 300.00
10/24/09	CK# 1057	POLK COUNTY DEMOCRATE 5661 FLEUR DR. DES MOINES, IA 50321	S DINNER EXPENSE FOR CAMPAIGN	200.00
	ID#			
	ID# CK#			
	ID#			
	ID# CK#			·
	ID#			
	ID# CK#			

THIS BOX	APPRIES TO CA	NDIDATES' C	COMMITTEES ONLY:

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	$\bigcirc$		<b>~</b>
Page	0	of	0

SUB-TOTAL

TOTAL (if last page of this schedule)

COMMITTEE NAME (Mus	OMMITTEE NAME (Must be same as on Statement of Organization)				
MOORE	FUR	CITY	Council		

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
	CK THIS BOX MENDING M

# DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

		nas bee	
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/19/09	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 50316	PRINTING CAMPAIGN CARPS	\$ 333,90
10 23 09	CARTER PRINTING 1739 E. GRAND AVE. DES MOINES, IA 5031	PRINTING CAMPAIGN MAILER	1,426.76
10 23 09	SKIP MOORE 3822 E. 28th ST. DES MOINES, IA 50317	COPYING WARP MAPS, OFFICE SUPPLIES FOR FUNDRAISER, LUNCH EXPENSE FOR CAMPAIAN POSTAGEI FOR THANKYOUN	80,98 otes
T TRANSPORTED TO THE PROPERTY OF THE PROPERTY			
ACCOUNTS OF THE PROPERTY OF TH			
6		SUB-TOTAL	\$ 1841.64
	\$ 1841.64		
*If actual figure is	ofof		

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
10/24/07	BOBGILMORE 13772 150th ST. DAWSON, IA 50066		PAINTING OF SIGNS	500.00	
	· · · · · · · · · · · · · · · · · · ·				
			SUB-TOTAL	\$500,00	
			TOTAL (if last page of this schedule)	\$500,00 \$ 500,00	

Page

(for Schedule E)

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the

committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives

by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no

familial relationship, enter "not applicable" in the relationship column.